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VIA FACSIMILE NO.: 571-273-8300P A T E N T
RAP04 P-650A

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | | |
|-----------------|---|-------------------------------------|------------------------|
| Serial No. | : | 10/710,442 | Confirmation No.: 4441 |
| Group | : | 3654 | |
| Applicant | : | Harry T. Edwards | |
| Filing Date | : | July 12, 2004 | |
| Examiner | : | Matthews, Terrell Howard | |
| For | : | BAGGAGE SCREENING SYSTEM AND METHOD | |
| Atty Docket No. | : | RAP04 P-650A | |
| Customer No. | : | 28101 | |

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being facsimile transmitted to the Patent and Trademark Office on the date shown below:

1. RESPONSE (10 pages)
2. PETITION AND FEE FOR EXTENSION OF TIME form
(1 page, in duplicate)
3. CLAIMS AS AMENDED form (1 page, in duplicate)
4. REPLACEMENT DRAWING SHEETS (5 sheets)
5. ANNOTATED DRAWING SHEET SHOWING CHANGES (1 sheet)

YOU SHOULD RECEIVE A TOTAL OF TWENTY-ONE (21) PAGES.

Dated: April 11, 2006.

Donna J. Raaymakers

Donna J. Raaymakers
 Van Dyke, Gardner, Linn & Burkhart, LLP
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FSB:djr
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Dear Sir:

Transmitted herewith is an amendment in the above-identified application.
 The fee has been calculated as shown below:

| <u>CLAIMS AS AMENDED</u> | | | | | | | | |
|---|----------------------------------|-------|---------------------------------|---------------|--------------|---------------------------|---------|-----------|
| | Col. 1 | | Col. 2 | Col. 3 | Small Entity | Other Than a Small Entity | | |
| | Claims Remaining After Amendment | | Highest No. Previously Paid For | Present Extra | Rate | Add'l Fee | Rate | Add'l Fee |
| Total Claims | * 24 | Minus | ** 35 | = 0 | x \$ 25 | \$ - | x \$ 50 | \$ 0 |
| Independent Claims | * 3 | Minus | *** 3 | = 0 | x \$100 | \$ - | x \$200 | \$ 0 |
| First Presentation of Multiple Dependent Claims \$180 | | | | | | \$ - | x \$360 | \$ 0 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | | \$ - | | \$ 0 |

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

1. Small entity status of this application 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
2. No additional fee is required.
3. A check in the amount of \$____ is attached.
4. Please charge any fees due to Deposit Account No. 22-0190.
 A duplicate copy of this sheet is attached.

VAN DYKE, GARDNER, LINN & BURKHART, LLP

By:

Frederick S. Burkhart
 Registration No. 29 288
 P.O. Box 888695
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 (616) 988-4104

Dated: April 11, 2006.

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CLAIMS AS AMENDED

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| | Claims Remaining After Amendment | | Highest No. Previously Paid For | Present Extra | Rate | Add'l Fee | Rate |
| Total Claims | * 24 | Minus | ** 35 | = 0 | x \$ 25 | \$ - | x \$ 50 |
| Independent Claims | * 3 | Minus | *** 3 | = 0 | x \$100 | \$ - | x \$200 |
| First Presentation of Multiple Dependent Claims \$180 | | | | | | \$ - | x \$360 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | | \$ - | \$ 0 |

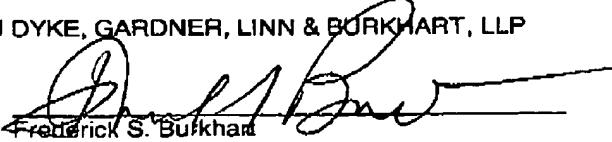
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